Complaint Against Police Department Personnel Confidential

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Citizen Information:		
First Name:	Last Name:	
Address:		
City	State	Zip
Home phone:	Cell phone:	
Area code & number	Area code & number	
Officer Information:		
Name:	Badge #:	
Location of incident:		
Statement of Allegation:		

I understand that this statement of complaint will be submitted to the Bosque Farms Police Department and may be the basis for an investigation. Further, I declare and affirm that the facts contained herein are complete, accurate and true to the best of my knowledge and belief. Further, I declare and affirm that my statement has been made by me voluntarily without persuasion, coercion or promise of any kind. I understand that under the regulations of the police department the officer against whom this complaint is filed may be entitled to request a hearing before a board of inquiry. By signing and filing this complaint, I hereby agree to appear before a board of inquiry, if one is requested by the officer, and to testify under oath concerning all matters relevant to this complaint.			
Signature of Complainant	Date		
Name of person receiving complaint:			
Time & date received:			